#### **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

# For State and Local Candidates For Single-Candidate Committees

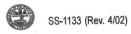
	10- 11115050	ANDIDATEODO	ONANATTEE		
DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR C			
10-25.10	1	Ason	BOWL	3. ELECTION DATE	
2.b. IF COMMITTEE, NAME OF CAND	IDATE				
				11-2.	10
4.a. CAMPAIGN ADDRESS AND PHON Street or Rural Route	NE City		State	Zip Code	Phone
P.O. Box 5		MIN.	TA	37377	4233-886-9997
4.b. CANDIDATE'S HOME ADDRESS			, ,,		
		.1	State	Zip Code	Phone
102 KIVEN	POINT RO SILN	AL MTN.	TN	37377	423-886-9208
5. OFFICE SOUGHT (include district	14			TREASURER (may be	candidate)
TOWN COUNCI	L - SIGNAL MAN	4	THRIS	SIMON	
7. CATEGORY OR REPORT (Check o	ne)				
FIRST SECOND	THIRD FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER (	QUARTER QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL	SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING F	PERIOD	8.b. ENDING		ORTING PERIOD	
10-1-10			10-23	-10	
9. (Check one)					
a. This campaign is exempt fr	om detailed disclosure becau	use contributions	(including in-k	ind) received total \$1,0	00 or less AND expendi-
tures total \$1,000 or less for	or this reporting period. (Con	nplete items 12d	., 12e. and 12f	.)	
b. This campaign is required	to file a detailed financial disc	closure because	contributions (	including in-kind) receiv	ed total more than \$1,000
and/or expenditures total n	nore than \$1,000 for this repo	orting period.			
			113		
10. I/we do solemnly swear or affirm	that the information contained	ed in this campa	aign financial d	isclosure report is true	and that this report is an
accurate accounting of campaign Financial Disclosure Act. Additio	nally. I/we swear or affirm that	at no campaign	contributions ha	ave been expended for	the personal financial
benefit of the candidate or for an	y other nonpolitical purpose a	as defined by the	e federal interna	al revenue code.	
$M_{1} \cap N_{2}$	1		140		
Inal J. 12w	259ct 10	_	Cons.	25	10-25.10
signature of candidate	date		signature	of political treasurer	date
11. WITNESS SIGNATURE				* / -	
But-megants	10-75-	10	alma	then lim	m 10/25/10
aignature of witness	date	<i>i</i> –	sign	nature of witness	date
signature of witness V	uate		V sign	late of withess	uate
12. SUMMARY					
				-13-	
a. BALANCE ON HAND LAST R	EPORT			\$	-
TOTAL BEOGRAPH HORSE	OD			1300.00	
c. TOTAL DISBURSEMENTS TH	IS PERIOD			\$ _1087.43	_
1					·
d. BALANCE ON HAND (12.a.	plus 12.b. minus 12.c.)				8_212.57
			***************************************		
e. TOTAL LOANS OUTSTANDI	NG				\$0-
	121/11/11	16			
f. TOTAL OBLIGATIONS OUTS	TANDING				. \$
3					



HOLESTWAY

#### **SUMMARY PAGE - CANDIDATE**

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD						
JASON BOWLING	FROM: 10-1-10	TO: 10-23-10					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this per	iod)	\$ 400.00	_				
b. Itemized Contributions (over \$100 from each source this period)		\$ 900.00	_				
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.	a. and 15.b.)		\$ 1300:00				
16. LOANS RECEIVED THIS REPORTING PERIOD			\$				
17. INTEREST RECEIVED THIS REPORTING PERIOD							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item	12.b.)		\$ 1300.00				
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed	by category - 6	e.g., printing, postage	, gasoline)				
BANNERS	\$ 87.1	8					
( N.1.1.)	\$ 277.	58					
STICKERS	\$ 30.4	6					
18 + 74 YARD SECNS	\$ 272.	58					
18 × 24 + 11× 14 SICN>	\$ 400.	13					
CHICLKS	\$ 24.5	0_					
	\$						
	\$						
	\$						
		7/12					
Total of Expenditures (\$100 or less each payee)		\$ 192.19	_				
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. a							
20. LOAN REPAYMENTS MADE THIS PERIOD\$\$							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in i	tem 12.c.)		\$ 1087.43				
22.IN-KIND CONTRIBUTIONS							
a. Unitemized in-kind contributions (\$100 or less from each source thi							
b. Itemized in-kind contributions (over \$100 from each source this period)\$							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add	1 22.a. and 22.	b.)	\$ 57.66				
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	a. Unitemized Obligations Outstanding (\$100 or less each)\$						
b. Itemized Obligations Outstanding (Over \$100 each)\$							
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							



### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVER		
JASON BOW	LTNC		FROM: 10-1-10	TO: 10-23-10
. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIO		(enter \$0 if first itemized p	page)	Amount 60
COMPLETE THE APPROPRIATE ITEMS FOR EAC	H ITEMIZED CONTRIBUTION (con	ntributions totaling more than	\$100 from any contributor	)
	tiddle Name	Contribution Received For:		Amount of Contribution
Robert	P	Ma: 5:-6 K	General Election	
Ro 3 n art		Primary Election	General Election	
SCOTT		Runoff (Local Election	nns Only)	1
doress 7 LANDAUR	CAO			\$100.00
1	State Zip Code TN 37377	Date of Contribution		Aggregate This Election
ocupation				And the state of t
Employer		9-29-1	0	\$100.00
First Name	Middle Name _	Contribution Received Fo	or:	Amount of Contribution
Last Name Organization Name	F	Primary Election	A General Election	
Last Name Organization Walle COBIRNETS				1
Address	754D25	Runoff (Local Élect	tions Only)	\$ 100.00
City SZGONA MTN	State Zip Code TN 37377	Date of Contribution		Aggregate This Election
Occupation				
Employer	-	9-30	-10	\$100.00
First Name	Middle Name	Contribution Received	For:	Amount of Contribution
1COBRUT		Primary Election	General Election	
Lest Name Organization Name	Ja.			
Adminos 1	LTSAIDRS	Runoff (Local Elec	ctions Only)	
		Date of Contribution		Aggregate This Election
Cocupation	State 7 N Zip Code 37377	and the second s	*	
Citupaus		_		4
Empoyer		9-28-	-10	7 500.00
First Warna	Middle Name	Contribution Received F	or.	Amount of Contribution
15 12 2	L	☐ Primary Election	General Election	s (management)
ast Name Organization Name		I Primary Election	General Electron	
FISCHER		Runoff (Local Ele	ections Only)	\$400.00
Address 4106 W R.	24.5	100000 10000		
City SZGNAL MTN	State Zip Code 37377	Date of Contribution		Aggregate This Election
Occupation				1
Occupation Employer	10.00	10-2	-10	\$ 400.00
Employer -		10-Z	- 10	
	es of this form are used.}	16-2	-10	\$ 400.00

### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				<ol><li>REPORT COVER</li></ol>	ING THE PERIOD	
JASON BONLENG				FROM: 10-1-10	TO: 16-23-10	
TOTAL ITEMIZED CAMPAIGN CONTRIBU	PRECEDING PAG	GE (enter \$0 if first itemized page	Amount \$1100.00			
COMPLETE THE APPROPRIATE ITEMS FOR I	EACH ITEMIZE	D CONTRIBUTION (	contributions totaling more than \$	100 from any contributor		
t Name  Roiszut  Name/Organization Name  Monutason  tress  Tock	4	Contribution Received For:  Primary Election	Amount of Contribution			
SIGNAL MTN.	State 7 N	Zip Code 37377	Date of Contribution		Aggregate This Election	
nployer			10-10-1	0	\$ 100.00	
rst Name A	Middle Name		Contribution Received For	г.	Amount of Contribution	
A L				General Election		
Address P. O Bay 15	346		Runoff (Local Election	ons Only)	\$100.00	
CHATTANOOGA	Idress P. O. Box 15346  State TN Zip Code TN 37415				Aggregate This Election	
occupation						
employer			10-12	2-10	\$ 100.00	
Test None	Middle Nam	ė	Contribution Received Fo	OF:	Amount of Contribution	
First Name Millione Name						
ast Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Elect	tions Only)		
City	State Zip Code		Date of Contribution	•	Aggregate This Election	
Occupation						
Employer						
First Name	Middle Na	me	Contribution Received Fo	DC.	Amount of Contribution	
Last Name/Organization Name		Primary Election	General Election			
Address			Runoff (Local Elec	ctions Only)		
City	State Zip Code		Date of Contribution		Aggregate This Election	
Occupation						
Employer						
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3. of next page if additional (If this is the last page of contributions, this amount is the last page of contributions).	pages of this form	n are used.) in item 15b. of summary.	)		1300.00	

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				<ol><li>REPORT COVER</li></ol>		
JASON BOWL	FROM: 10-1-10	TO: 10-23-10				
9 430 - 130 42 1		Amount 8667.80				
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	RES FROM	PRECEDING PAGE	(enter \$0 if first itemized pa	ge)	8667.80	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
			Purpose of Expenditure		Amount of Expenditure	
First Name	Middle Name		Fulpose of Experiature		7 mount of Experience	
Last Name/Business Name  CIREATEVIE BUSTNESS FORMS						
Address P.O. Box 767						
City OCTRWAN	State 7	Zip Code 37363	BANNERS		\$ 87.18	
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
	~5 I N 12 55	Forms				
111	-14 1011 35					
Address P.O. 1362 76	7		,		4:	
City OOLTE WAN	State TN	Zip Code 37363	IAND STON	>	272.58	
First Name	Middle Name	9	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	Busto	sess Forms				
Address P. O. Bux 76						
City	State	Zip Code			\$30.46	
OGLTEWAIL	TN	37363	STICKINS		150,96	
First Name	t Name Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name CRRATEUR BASENRSS FORMS						
Address 7.0. BG 767						
City	State	Zip Code	18 + 24 11	( <	\$272.58	
OOLTRWAH	TN	37363	1872411	this tens	212.58	
First Namo	Middle Name	9	Purpose of Expenditure		Amount of Expenditure	
First Name						
Last Name/Business Name CIZRATIVIZ BUSINAS FORMS						
Address 20, 130x 767			18×24 STEN	>	<i>t</i>	
City OOLTRWAIL	State	Zip Code 37363	11× 14 SIEN	>	\$400.13	
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address 1210 TAFT HICHWAY						
City STENAL MTN State Zip Code 77377			CHRCKS		\$ 24.50	
5. TOTAL ITEMIZED EXPENDITURES  (Carry forward to item 3. of next page if additional pag						
	es of this form	are used.)			140 = 15	
(If this is the last page of expenditures, this amount m	es of this form a ust be shown in	are used.) item 19b. of summary.)			1087.43	

#### **ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COI	2. REPORT COVERING THE PERIOD					
J Aso N	BOWLIN	-		FROM: 10-1-10	TO: 10-23-10	
3. TOTAL ITEMIZED IN-KIND CON	TDIRI ITIONE EDO	(enter \$0 if first itemized page	2)	Amount		
					tributer during the posing)	
4. COMPLETE THE APPROPRIATE IT	EMO FUR EAUTHE	MISED IM-VIND COM KIRC				
First Name	Middle	Name	In-Kind Contribution Receive Primary Election	d For: LGeneral Election	Value of In-Kind Contribution	
Last Name/Organization Name			Runoff (Local Elections Only)			
Address 312 Aizac	w PRIVI	2	Date of In-Kind Contribution  / O - / Z - 10  Aggregate this Election			
Occupation G.C. Supt.	State 7	Zip Code 37377	Description of In-Kind Contribution			
Occupation	Employer 5 M ( (	7 (1	POSTAGE			
				od Form	Value of la Vand On this face	
First Name	Middle		In-Kind Contribution Receive Primary Election	ed For: Seneral Election	Value of In-Kind Contribution	
Last Name/Organization Name J .~~ ^	SIF-22 52	mor	Runoff (Local Election	ons Only)	\$55.50	
Address 312 Arro	N PRIVE		Date of In-Kind Contribution	10-2-10	Aggregate this Election	
City SIGNAL MAN	State	37377	Description of In-Kind Contribution			
Occupation	Employer		NOTE C	A.I. O.		
First Name	Middle	Name	In-Kind Contribution Received Primary Election		Value of In-Kind Contribution	
Last Name/Organization Name			Runoff (Local Election	ons Only)		
Address		Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution	n		
Occupation	Employer	Annual An				
First Name	Minnie	Name	In-Kind Contribution Receiv	red For	Value of In-Kind Contribution	
Last Name/Organization Name	T mutat	The second secon		General Election	- Section of the sect	
ment state of district state.			Runoff (Local Election	ons Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution	n		
Occupation	Employer					
First Name	Middle	Name	In-Kind Contribution Recei		Value of In-Kind Contribution	
Last Name/Organization Name			Primary Election			
Address			Date of In-Kind Contribution	ons Only)	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution	n		
		- Indiana	- The same same same same same same same sam			
Occupation	Employer					
5. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS					
(Carry forward to item 3, of next page if (If this is the last page of in-kind contribu-	additional pages of this fo		ary.)		\$ 57.66	
SS-1128 (Rev. 2/06)			De	ane / of /	DDA 1150	